

City of Riverside
2009 Blue Cross HMO VALUE (SELECT) PLAN

Group and Dependent Status		Full Time Monthly Deduction	Full Time Cost per Pay Period	3/4 Time Cost per Pay Period	1/2 Time Cost per Pay Period
			Employee	Employee	Employee
Confidential	<i>Single</i>	\$0.00	\$0.00	\$0.00	\$0.00
	<i>2-Party</i>	\$0.00	\$0.00	\$48.25	\$145.25
	<i>Family</i>	\$0.00	\$0.00	\$111.82	\$231.32
Executive	<i>Single</i>	\$0.00	\$0.00	n/a	n/a
	<i>2-Party</i>	\$0.00	\$0.00	n/a	n/a
	<i>Family</i>	\$0.00	\$0.00	n/a	n/a
Management	<i>Single</i>	0.00	0.00	\$0.00	\$0.00
	<i>2-Party</i>	0.00	0.00	\$48.25	\$145.25
	<i>Family</i>	0.00	0.00	\$111.82	\$231.32
Fire	<i>Single</i>	0.00	0.00	n/a	n/a
	<i>2-Party</i>	0.00	0.00	n/a	n/a
	<i>Family</i>	110.64	55.32	n/a	n/a
Fire Management	<i>Single</i>	0.00	0.00	n/a	n/a
	<i>2-Party</i>	0.00	0.00	n/a	n/a
	<i>Family</i>	90.64	45.32	n/a	n/a
General	<i>Single</i>	0.00	0.00	\$0.00	\$29.90
	<i>2-Party</i>	0.00	0.00	\$67.38	\$158.00
	<i>Family</i>	50.64	25.32	\$136.57	\$247.82
Police Trainees	<i>Single</i>	0.00	0.00	\$0.00	\$0.00
	<i>2-Party</i>	0.00	0.00	\$0.00	\$0.00
	<i>Family</i>	50.64	25.32	\$0.00	\$0.00
Refuse	<i>Single</i>	0.00	0.00	\$0.00	\$29.90
	<i>2-Party</i>	0.00	0.00	\$67.38	\$158.00
	<i>Family</i>	50.64	25.32	\$136.57	\$247.82
Utilities Field	<i>Single</i>	0.00	0.00	\$0.00	\$0.00
	<i>2-Party</i>	0.00	0.00	\$0.00	\$0.00
	<i>Family</i>	0.00	0.00	\$0.00	\$0.00
Utilities Field Supv.	<i>Single</i>	0.00	0.00	\$0.00	\$0.00
	<i>2-Party</i>	0.00	0.00	\$0.00	\$0.00
	<i>Family</i>	0.00	\$0.00	\$0.00	\$0.00